# Exhibit 5



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# School of Psychology Doctoral Program in Clinical Psychology

## PRACTICUM TRAINING CONTRACT AND GOALS FORM

This form is a contract and a description of practicum goals developed by the practicum site and the student. Prior to the development of the contract, the student's Faculty Advisor contacts the site supervisor to discuss the student's training needs. The form is then completed by the student and signed by the student, the site supervisor, and the student's Faculty Advisor and submitted to Elaine Hanson PsyD/JD, the Director of Practicum Training (DPT). When the DPT approves the contract the student, supervisor, and Faculty Advisor will receive e-mail confirmation of the approval. Students may not begin any practicum placement until they receive approval to do so. If there are any changes to the contract the student is required to inform the DPT and Faculty Advisor.

## **Part I: Training Contract**

	Jason Sadora jsadora@email.fielding.edu <sup>tyAdvisor:</sup> Dr. Maureen Lasse	ın	Student ID: 0188838		
Site Name: Site Address:	The Psychology Institute of 2451 S. Buffalo Drive, Suite	Las Vega:	S		
Proposed Start	Date: 4/11/2022	Proposed C	Completion Date: 05/01/2023		
Supervision  Name of primary supervisor:  Degree: Ph.D.  License#: PY0742 State: NV  Phone: 702-546-9600 ext. email: drmoreggi@psychinstitutelv.com  Is primary supervisor an employee of the site?  yes no  If "no," is primary supervisor an independent contractor for the site?  yes no  If primary supervisor is an independent contractor, number of hours on-site:  Is primary supervisor clinically responsible for patients seen by student?  yes no  If no, who is clinically responsible?					

## Student's Anticipated Weekly Schedule at Site

#### **Direct Service**

- 1. 7 Hours spent in conducting psychological assessments.
- 2. 7 Hours spent in conducting psychotherapy or other interventions.

#### **Indirect Service**

- 3. 2 Hours spent devoted to administrative duties (paperwork, meetings, etc.)
- 4. 1 Hours spent devoted to general/didactic training activities (e.g., in-service presentations, practicum seminars)
- 5. 1 Hours spent in research-related activities
- Hours spent in other activities. Specify:

#### Supervision

- 7. 2 Hours spent in individual supervision with a licensed doctoral-level psychologist.
- Hours spent in group supervision with a licensed doctoral-level psychologist.
- 9. Hours spent in individual supervision with someone other than a licensed doctoral-level psychologist (e.g., social worker, psychiatrist, LCSW, MA licensed and certified supervisor).
- 10. Hours spent in group supervision with someone other than a licensed doctoral-level psychologist.

#### **TOTALS**

Total Weekly Clinical hours (1-6, above) 18
Total Weekly Direct Service Hours: (numbers 1 & 2, above) 14
Total Weekly Supervision Hours (numbers 7-10, above 2 Must be at least 15% of total weekly clinical
practicum hours: i.e., (1-6, above) x .15  Total Weekly Individual Supervision Hours (numbers 7 & 9, above) 2  Must be at least 8% of total weekly clinical practicum hours hours: i.e., (1-6, above) x .08
Total Weekly Supervision Hours by Licensed, Doctoral-Level Psychologist (numbers 7 & 8, above 2
Must be at least 8% of total weekly clinical practicum hours hours: : i.e., (1-6, above) x .08
Total weekly hours 18 x no. of weeks 52 = <b>Total Practicum Hours</b> 900
<b>NOTES</b> : If you make changes to any of the above information (supervisor, end date, commitment to site), please e-mail the DPT with information on the changes. (Total direct service hours must be at least 300, during first 1000 hours of practicum)
Will this site allow you to obtain the case material you will need for your COMPS/ IQE?  yes no N/A If "no," how do you intend to obtain this material?
Will this practicum meet your state licensure requirements for practicum? ✓ yes ☐ no ☐ N/A
Is this practicum intended to satisfy the requirements for any Fielding concentration? If yes, please check:  Health Psychology Neuropsychology
Is this an assessment practicum? yes vno

### Part II: Practicum Goals

Use this section to develop practicum goals with your site supervisor. In addition, record your training activities on Time2Track. Keep a copy for your supervisor to sign at the end of the practicum

Within each of the five areas of competence, indicate your specific learning needs and how you plan to meet those needs during the practicum. Give sufficient detail so that you and your practicum supervisor are clear and can agree upon specific training activities. Each area does not need to be met by every site.

1. Integration of Practice with Research and Theory Student's Evaluation of **Learning Needs Training Activity** Training @ completion Inadequate Gain experience in identifying and Applying relevant literature and clinical understanding causes that contribute to an observations to formulate case conceptualization Met expectations individual's functioning and well-being. using cognitive behavior therapy. Exceeded expectations Inadequate | Gain knowledge about evidence-based Read literature relevant to clinical observations intervention techniques for a variety of clinical to expand applied knowledge of evidence based Met expectations presentations. interventions. Exceeded expectations To implement and complete psychotherapy Inadequate Use direct observation, individual and group treatment with a diverse population and gain training to formulate treatment plan utilizing Met expectations experience with case conceptualization. various therapeutic approaches. Exceeded expectations 2. Use and Interpretation of Psychological Assessment Methods Student's Evaluation of Learning Needs **Training Activity** Training @ completion To increase ability to select measures that Inadequate Become familiar with available assessment inform clinical decision making and sufficiently tools, practice administration of measures, and Met expectations  $\square$ address referral concerns. integrating results into clinical activities. Exceeded expectations Inadequate Interpret assessments to summarize functioning, Reading relevant literature, practice interpreting identify strengths/ weaknesses, inform treatment assessments to formulate case Met expectations plans, and provide relevant recommendations. conceptualization, and inform treatment Exceeded expectations Gain experience with assessments that capture Inadequate Observation, training with assessments, direct memory, feigning, malingering and higher level experience with using assessments to inform Met expectations functioning with adult population. case conceptualization and treatment planning.

Exceeded expectations

3. Experience In A Variety Of Interventions Across A Variety Of Problems And Populations
With Special Attention To Cultural And Individual Differences; Understanding Of The
Therapeutic Relationship.

Student's Evaluation
Training Needs

Training Activity

Inadequate

		Student's Evaluation of
Learning Needs	Training Activity	Training @ completion
Provide interventions for patient's with respect	Reading relevant research, clinical observations,	Inadequate
for how ethnicity, age, SES disability, native	practice implementing interventions and	Met expectations
language impact the therapeutic relationship.	incorporate supervisor feedback.	Exceeded expectations
Gain experience with application of intervention	Practice rapport building with clients, conduct	Inadequate
techniques to build a successful therapeutic	clinical interviews, incorporate feedback to	Met expectations
alliance with young adult and adult populations.	improve skills.	Exceeded expectations
Gain experience with implementing various CBT	Identify specific interventions to address specific	Inadequate
techniques for a variety of presenting problems.	symptomatology, and tailor it to the client's	Met expectations 🔲
	needs.	Exceeded expectations

4. Knowledge and sensitivity to act within the ethical and professional standards of clinical psychology

Learning Needs	Training Activity	Student's Evaluation of Training @ completion
Apply knowledge of State, Federal, and Professional ethical codes, standards, guidelines, and laws to clinical practice.	Reading relevant literature, direct application to each case, training and supervision	Inadequate  Met expectations  Exceeded expectations
Practice adherence to HIPAA, consent, and release of information standards as expressed through diligent follow through with each patient.	Reading relevant literature, direct application to each case, training and supervision.	Inadequate  Met expectations  Exceeded expectations
Gain applied knowledge of ethical codes, standards, and guidelines and apply to casework within state of Nevada	Direct observation and experience, reading and applying relevant literature and research, training, and supervision.	Inadequate  Met expectations  Exceeded expectations

5. Personal Development

Learning Needs	Training Activity	Student's Evaluation of Training @ completion
Expand clinical skills provide treatment with outpatient population and working collaboratively with other community organizations.	Direct experience working with other organizations, and provide collaborative treatment in group and individual settings.	Inadequate  Met expectations  Exceeded expectations
Learn positive outreach and collaboration techniques for building lasting partnerships and networking within the community.	Direct experience with community partners and participation in outreach activities.	Inadequate  Met expectations  Exceeded expectations
Practice self-care and stress management as appropriate for the professional environment.	Incorporating relevant research, seek supervision and mentorship opportunities, and incorporation of feedback.	Inadequate  Met expectations  Exceeded expectations

## **Part III: Monitoring Procedures**

- 1. The faculty advisor will contact the site supervisor at practicum mid-point.
- If progress is adequate, and all indications suggest that the practicum is progressing well, the faculty advisor records this status in the student's record using the Mid-Practicum Check-in Form.
- 3. If progress is inadequate:
  - The faculty advisor will establish what the issues are with the practicum supervisor and with the student.
  - The faculty advisor will arrange remediation of the issue in consultation with, at minimum, the student, the site supervisor, and the faculty advisor. Remediation planning may include the Director of Practicum Training (DPT) and/or the Director of Clinical Training (DCT).
  - The faculty advisor will inform the DPT of the issue and its resolution or remediation;
     the DPT keeps a record in student file.
  - If a remediation plan has been developed, the faculty advisor will contact the site supervisor at least twice during the remainder of the practicum to confirm that the issue(s) have resolved and the training is proceeding well.
- 4. If the issue(s) persist, a negotiation takes place, initiated by either the student's faculty advisor or site supervisor, and the best options in the specific circumstance are discussed. The negotiation should include the student's faculty advisor, the DPT, and the DCT at a minimum, representing FGU. The options are withdrawal from the training site or allowing the student to remain in the practicum with a modified training contract.
- 5. Should an issue arise that the student considers problematic:
  - The student contacts the faculty advisor to discuss the issue. The faculty advisor instructs the student to provide adequate data/documentation regarding the issue(s).
     Preferably, this should be written documentation.
  - The faculty advisor alerts the DPT.
  - Based on the data provided, the faculty advisor consults with the student regarding the best approach to the site regarding the issue.
  - With the faculty advisor's knowledge, the student approaches the practicum supervisor
    to discuss the issue. If the issue can be resolved, the student reports the outcome to the
    faculty advisor and DPT. A notation is made in both the faculty advisor's file and the
    DPT's student file.
- 6. If the issue remains unresolved, the faculty advisor will step in to discuss the issue with the supervisor/director of training:
  - If the faculty advisor is able to resolve the issue, the DPT is alerted and a notation is made in the both the faculty advisor's file and the DPT's file.
  - Additional contacts with the site supervisor and the student will be made during the remainder of the practicum.

- 7. If the issue remains unresolved
  - The DPT (and possibly the DCT) is alerted.
  - The DPT, the faculty advisor, the student and the site supervisor discuss and negotiate either withdrawal or continuation of the student with a modified practicum contract (e.g., supervisor change, service placement change).
- 8. Site supervisor/Director of Practicum Training initiated contact regarding issue(s): The procedures described in steps 3-7, above, should be followed.
- 9. In the highly unlikely event that a student is to be withdrawn or dismissed from the clinical or respecialization programs while actively in practicum training, the DPT will contact the practicum supervisor to develop a process for an ethical and professional termination of patients/clients by the trainee. During that period of time, the student will remain covered by the program's liability insurance.
- 10. In the event that a student's behavior is considered by the practicum placement to be too serious for remediation or for contract adjustment, the student will be notified of this fact and withdrawn from the placement immediately.

Signatures			
Student:			3/23/2022
Primary Supervisor:	3/23/	12022	
Fielding Faculty Adv	isor:	Date:	
Elaine Hanson, Ph	n.D.: Director of Practicum Training		